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Under the Paperwork Reduction Act of 1995, no persons are required to response to the Paperwork Reduction Act of 1995, no persons are required to response to the Paperwork Reduction Act of 1995, no persons are required to response to the Paperwork Reduction Act of 1995, no persons are required to response to the Paperwork Reduction Act of 1995, no persons are required to response to the Paperwork Reduction Act of 1995, no persons are required to response to the Paperwork Reduction Act of 1995, no persons are required to response to the Paperwork Reduction Act of 1995, no persons are required to response to the Paperwork Reduction Act of 1995, no persons are required to response to the Paperwork Reduction Act of 1995, no persons are required to response to the Paperwork Reduction Reduct

UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No.	11246-0013	45
First Inventor	Alliss, George E.	164
Title	Vegetation Trimmer	Apparatu
Express Mail Label No.	EV24877125US)

Signature Sign	(Unity for new nonpri	ovisional applications under 37 CPR 1.53(0))	Express Mail Label No. EV 240 /	712303					
Soluri an original and a duplicate for fee processing)			ADDRESS TO: Commission	ner for Patents ISO					
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) Of prior application No: Art Unit: For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS Customer Number: OR X Correspondence address below Name John F. Letchford Klehr, Harrison, Harvey, Branzburg & Ellers LLP City Philadelphia State PA Zip Code 19102 Country US Telephone 215-569-3495 Fax 215-568-660 Name (Print/Type) John F. Letchford Registration No. (Attorney/Agent) 33,328 Signature	(Submit an origin. 2. X Applicant claim See 37 CFR 1. 3. X Specification (preferred arrang - Descriptive title - Cross Referenc - Statement Regis - Reference to se or a computer p - Background of - Brief Summay - Brief Descriptio - Detailled Descriptio - Claim(s) - Abstract of the 4. X Drawing(s) (35 5. Oath or Declaration a. X Newly exect b. Copy from a (for continu. i. DELETI Signed st name in 1.63(d)(2)	al and a duplicate for fee processing) is small entity status. 27. [Total Pages2	Computer Program (Appen 8. Nucleotide and/or Amino Acid S (if applicable, all necessary) a. Computer Readable II b. Specification Sequen i. CD-ROM or CD ii. Paper c. Statements verifying ACCOMPANYING AP 9. Assignment Papers (cow. 10. 37 CFR 3.73(b) Statemen (when there is an assign English Translation Document (IDS)/PTO-14 13. Preliminary Amendment 14. Return Receipt Postcard (Should be specifically it (Should be specifically it (If foreign priority is claim Nonpublication Request (b)(2)(B)(1), Applicant muor its equivalent. 17. Other:	dix) bequence Submission Form (CRF) ce Listing on: D-R (2 copies); or identity of above copies PLICATION PARTS er sheet & document(s)) int					
Prior application information: Examiner	18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the								
Customer Number: OR X Correspondence address below	Prior application information: Examiner Art Unit: For CONTINUATION OF DIVISIONAL APPS only, The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.								
Name John F. Letchford Address Klehr, Harrison, Harvey, Branzburg & Ellers LLP 260 S. Broad Street State PA Zip Code 19102 Country US Telephone 215-569-3495 Fax 215-568-66 Name (Print/Type) John F. Letchford Registration No. (Attorney/Agent) 33,328 Signature Date 8.29-208		19. CORRESPO	MUCIACE WONKESS						
Address Klehr, Harrison, Harvey, Branzburg & Ellers LLP 260 S. Broad Street State PA Zip Code 19102 Country US Telephone 215-569-3495 Fax 215-568-66 Name (Print/Type) John F. Letchford Registration No. (Attorney/Agent) 33,328 Signature Date \$\mathre{F}\$: 29-20%	Customer Num	aber:	OR X Corre	spondence address below					
City	Name John F. Letchford								
City Philadelphia State PA 2ip Code 19102 Country US Telephone 215-569-3495 Fax 215-568-66 Name (Print/Type) John F. Leterford Registration No. (Attomey/Agent) 33,328 Signature Date \$7.29-20%	Kleh	Klehr, Harrison, Harvey, Branzburg & Ellers LLP							
Country US Telephone 215-569-3495 Fax 215-568-66 Name (Print/Type) John F. Letonford Registration No. (Attorney/Agent) 33,328 Signature Date \$7.29-20%	C14.		State PA	Zip Code 19102					
Name (Print/Type) John F. Letonford Registration No. (Attorney/Agent) 33,328 Signature Date 8.29-20%	<u></u>			Fax 215-568-6603					
Signature Date 8-29-20%		John F. Letarford		33,328					
Signature 2 - Cost		boin 1. December	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
This collection of information is required by 37/55% (53/h). The information is required to obtain or retain a benefit by the public which is to file (and by the	<u></u>			10 67-000					

This collection of information is required by 37 (EW 53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including galabring, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mall Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (08-03)

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Complete if Known

900 Request for expedited examination of a design application

SUBTOTAL (3)

40

FEE IRANSWILLA	L.	Application Number			er			
for EV 2002			Date					
for FY 2003 Effective 01/01/2003, Patent fees are subject to annual revision		First Named Inventor Alliss, Geo			tor Alliss, George E.			
		Exam	niner Na	ame				
Applicant claims small entity status. See 37 CFR 1.27		Art U	nit		· 1			
TOTAL AMOUNT OF PAYMENT (\$): 583		Attorr	ney Do	cket N	o. 11246-0013			
METHOD OF PAYMENT (check all that apply)	Π	FEE CALCULATION (continued)						
X Check Credit card Money Other None	3. /	3. ADDITIONAL FEES						
Order Contract	4	Large Entity Small Entity						
Deposit Account: Deposit	Fee Cod	Fee e (\$)		Fee (\$)	Fee Description	Con Daid		
Account 501555	105		2051		Surcharge - late filing fee or oath	Fee Paid		
Deposit	1052	2 50	2052	25	Surcharge - late provisional filing fee or			
Account Name	1053	3 130	1053		cover sheet Non-English specification			
The Director is authorized to: (check all that apply)	ł	2 2,520	1812		For filing a request for ex parte reexamination			
Charge fee(s) indicated below XX Credit any overpayments Charge any additional fee(s) during the pendency of this application	180/	•	1804	920*	Requesting publication of SIR prior to Examiner action			
Charge fee(s) indicated below, except for the filing fee	180	5 1,840*	1805	1,840*	Requesting publication of SIR after Examiner action			
to the above-identified deposit account.	125	1 110	2251		Extension for reply within first month			
FEE CALCULATION 1. BASIC FILING FEE	1252	2 410	2252		Extension for reply within second month			
T. BASIC FILING FEE Large Entity Small Entity		930	2253	465	Extension for reply within third month			
Fee Fee Fee Fee Description Fee Paid Code (\$)	1254	1,450	2254	725	Extension for reply within fourth month	<u> </u>		
1001 750 2001 375 Utility filing fee 375	125	5 1,970	2255	985	Extension for reply within fifth month	 		
1002 330 2002 165 Design filing fee	140	320	2401	160	Notice of Appeal	 		
1003 520 2003 260 Plant filing fee	1402	320	2402	160	Filing a brief in support of an appeal	 		
1004 750 2004 375 Reissue filing fee	1403		2403	140	Request for oral hearing	ļI		
1005 160 2005 80 Provisional filing fee	145	•	1451		Petition to institute a public use proceeding	ļI		
SUBTOTAL (1) (\$) 375	1452		2452		Petition to revive - unavoidable	 		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		3 1,300	2453		Petition to revive - unintentional	 		
Fee from Extra Claims below Fee Paid	150	1 1,300	2501 2502		Utility issue fee (or reissue)	 		
Total Claims 34 .20** = 14 x 9 = 126	150		2502		Design issue fee Plant issue fee	 		
Independent Claims 4 - 3** = 1 X 1 = 42	1460		1460		Petitions to the Commissioner	 		
Multiple Dependent 168	180		1807		Processing fee under 37 CFR 1.17(g)			
Large Entity Small Entity	180		1806		Submission of Information Disclosure Stmt			
Fee Fee Fee Fee Fee Description Code (\$) Code (\$)	802		8021		Recording each patent assignment per	40		
1202 18 2202 9 Claims in excess of 20	1809		2809		property (times number of properties) Filing a submission after final rejection			
1201 84 2201 42 Independent claims in excess of 3	100	7 130	2008	313	(37 CFR 1.129(a))			
1203 280 2203 140 Multiple dependent claim, if not paid 1204 84 2204 42 "Reissue independent claims	181	750	2810	375	For each additional invention to be examined (37 CFR 1.129(b))			
over original patent	180	1 750	2801	375	Request for Continued Examination (RCE)	1 1		

(Complete (if applicable)) Registration No. Name (Print/Type) 33,328 Telephon@15-569-3495 John F. Letchford 8-29-2003 Signature

1802 900 1802 Other fee (specify)

*Reduced by Basic Filing Fee Paid

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2205

SUBTOTAL (2)

**or number previously paid, if greater, For Reissues, see abov

** Reissue claims in excess of 20 and over original patent

(\$) 543

PTO/SB/06 (08-03)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number				
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY		OR	OTHER THAN SMALL ENTITY		
	FOR NUMBER FILED NUMBER EXTRA		R EXTRA		RATE	FEE]	RATE	FEE		
	C FEE FR 1.16(a))							s 375	OR		\$
	AL CLAIMS CFR 1.16(c))	34	minus 20 =	. 14	-		x \$9=	126	OR	x \$=	
INDE	PENDENT CLAIN FR 1.16(b))	AS 4	minus 3	- · 1			x \$42 =	42	OR	x \$ =	
\vdash		NT CLAIM PRESEN		CFR 1.16(d))					OR		·
_						l	+ \$=	5.40	1	+\$=	
* If ti	ne difference in c	olumn 1 is less tha	n zero, ente	er "0" in column :	2.		TOTAL	543	OR	TOTAL	L
	CI	_AIMS AS AME	ENDED ~	PART II							
i		(Column 1)		(Column 2)	(Column 3)		SMALL E	ENTITY	OR		R THAN ENTITY
NT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ME	Total (37 CFR 1.16(c))	•	Minus	**	=	1	x \$ =		OR	x \$=	
AMENDMENT	Independent (37 CFR 1.16(b))	•	Minus	***	=		x \$ =		OR	x \$=	
AM	FIRST PRESENT	ATION OF MULTIPLE	DEPENDEN	IT CLAIM (37 CF	R 1.16(d))				OR		
ш		7,1,10,10,1,11,11,11,11,11,11,11,11,11,11				J	+ \$= TOTAL		1	+ \$= TOTAL	
							ADD'L FEE	L	OR	ADD'L FEE	L
L.,		(Column 1)		(Column 2) HIGHEST	(Column 3)	1			٦.	r	т———
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
M	Total (37 CFR 1.16(c))	•	Minus	**	=		x \$=		OR	x \$=	
EN	Independent (37 CFR 1.16(b))	•	Minus	***	=	1	x \$=		OR	x \$=	
AM	FIRST PRESENT	TATION OF MULTIPL	E DEPENDEN	IT CLAIM (37 CF	R 1.16(d))	1	+s =		OR	+\$ =	
						,	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)				_		
NTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ΙŘ	Total (37 CFR 1.16(c))	*	Minus	**	=	1	x \$=		OR	x \$=	
AMENDME	Independent (37 CFR 1.16(b))	•	Minus	***	=	1	x \$=		OR	x s=	
AME	<u> </u>	TATION OF MULTIPL	E DEPENDE	NT CLAIM (37 C	FR 1.16(d))	1			OR	+ s =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					j	+ \$ = TOTAL	1	1	TOTAL		
	If the entry in a	column 1 is less tha	n the entry	in column 2, wri	ite "0" in column	ı 3.	ADD'L FEE	Ь	OR	ADD'L FEE	L
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".											

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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Certificate of Mailing under 37 CFR 1.10

I hereby certify that this PATENT APPLICATION pursuant to 37 C.F.R. §1.10 is being deposited with the United States Postal Service in an envelope as "Express Mail Post Office to Addressee," addressed to:

MAIL STOP PATENT APPLICATION Assistant Commissioner for Patents P. O. Box 1450 Alexandria, VA 22313-1450

n August 29,2003 Date	
anital Hal	
Signature	
Anita L. Hahn	
Typed or printed named of person signing Certific	cate